ł						_					<del></del>		
	PATI	ENT APPLIC	CATION F	EE DETE	ERM	INATION R	EC	CORD	A	plicati	on or Docket	Number	
L	Effective December 8, 2004								10/5/3304				
Г		CLAIMS	S AS EII EI	DART	- NG	Minston Absentato National Stage Processing Purateur Specialist SMALL ENT				Mineton & barreto			
- Commo				AS FILED - PART (Column 1)		Purality Specialist SM (703) 996-6421			MALL ENTITY TYPE		ORUZIA SANGER PROPER		
U.	S. NATIONA	L STAGE FEES	3				7	RATE	FEE	٦ '	703 365 98 RATE		
ВА	SIC FEE		SMALL E	SMALL ENT. = \$ 150		RGE ENT. = \$ 300	1	BASIC FEE		OF		FE	
EXAMINATION FEE				Satisfies PCT Article 33(1)- (4) = \$50/\$100		All other situations = \$ 100 / \$ 200		EXAM. FEE	150		EXAM. FEE		
SEARCH FEE			U.S. is ISA ALL other	U.S. is ISA = \$50/\$100 ALL other countries = \$200/\$400		All other situations = \$ 250 / \$ 500		SEARCH FEE	200		SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.				minus 100 =		/ 50 =		X \$ 125 =		-	X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			9	minus 20 =	*			X \$ 25 =	<del> </del>	OR	ļ		
INDEPENDENT CLAIMS			1	minus 3 =				X \$ 100 =	<del> </del>	OR	-	+-	
MU	TIPLE DEPE	NDENT CLAIM P	RESENT	1				+ \$ 180 =		OR		<del> </del>	
• If	the differen	ce in column 1 is	s less than ze	ero, enter "0"	in co	olumn 2		TOTAL	45)	OR	+ \$ 360 =	<del> </del>	
	(Column 1) (Column CLAIMS HIGHES			ก 2)	(Column 3)	1	SMALL	ENTITY	OR	OTHER SMALL E			
ENT A		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONA FEE	
AMENDMENT	Total	•	Minus			=		X \$ 25 =		OR	X \$ 50 =		
¥	Independent		Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DE			PENDENT CL	MIA		I	+ \$ 180 =		OR	+ \$ 360 =		
							1	TOTAL ADDIT. FEE		OR	TOTAL ADDIT.		
		(Column 1)		(Column	2)	(Column 3)					•		
- F		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	otal	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	ndependent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	<del></del>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
							T	OTAL ADDIT. FEE		OR L	TOTAL ADDIT.	<del></del>	
								FEE L		<b>O</b> 11	FEE L		

If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.